



COPY OF PAPERS  
ORIGINALLY FILED

Please type a plus sign (+) inside this box

PTO/SB/81/(02-01)  
Approved for use through 10/31/2002. OMB 0651-0035  
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to a collection of information unless it display a valid OMB control number.

**POWER OF ATTORNEY OR  
AUTHORIZATION OF AGENT**

Application Number	10/047686
Filing Date	November 13, 2001
First Named Inventor	YOSHITERU HATASE ET. AL.
Title	COLORED THERMOPLASTIC RESIN COMPOSITIONS FOR LASER WELDING, SPECIFIC NEUTRAL ANTHRAQUINONE
Group Art Unit	UNKNOWN
Examiner Name	UNKNOWN
Attorney Docket Number	AD6836 US NA

I hereby appoint:

☒ Practitioners at Customer Number

23906



23906  
PATENT TRADEMARK OFFICE

☐ Practitioners at Customer Number

Name	Registration Number

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Please change the correspondence address for the above-identified application to:

☒ The above-mentioned Customer Number.  
OR

☐ Practitioners at Customer Number

(Insert Bar Code Label Here)

☐ Firm or  
Individual Name

Address

Address

City

State

Country

Telephone

Fax

I am the:

☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71  
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

**SIGNATURE of Applicant or Assignee of Record**

Name Relko Koshida

Signature

Date

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below\*.

☐ \*Total of \_\_\_\_\_ forms are submitted.

Burden Hour Statement: This form is estimated to take 3 minutes to complete. Time will vary depending upon the needs of the individual case. Any Comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

RECEIVED  
AUG 01 2002  
TC 1700



COPY OF PAPERS  
ORIGINALLY FILED

Please type a plus sign (+) inside this box

PTO/SB/81/(02-01)  
Approved for use through 10/31/2002. OMB 0651-0035  
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to a collection of information unless it display a valid OMB control number.

### POWER OF ATTORNEY OR AUTHORIZATION OF AGENT

Application Number	10/047686
Filing Date	November 13, 2001
First Named Inventor	YOSHITERU HATASE ET. AL.
Title	COLORED THERMOPLASTIC RESIN COMPOSITIONS FOR LASER WELDING, SPECIFIC NEUTRAL ANTHRAQUINONE
Group Art Unit	UNKNOWN
Examiner Name	UNKNOWN
Attorney Docket Number	AD6836 US NA

I hereby appoint:

☒ Practitioners at Customer Number

23906



23906

PATENT TRADEMARK OFFICE

☐ Practitioners at Customer Number

Name	Registration Number

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Please change the correspondence address for the above-identified application to:

☒ The above-mentioned Customer Number.  
OR

☐ Practitioners at Customer Number

(Insert Bar Code Label Here)

☐ Firm or  
Individual Name

Address

Address

City

State

Country

Telephone

Fax

I am the:

☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71  
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

#### SIGNATURE of Applicant or Assignee of Record

Name Yoshiteru Hatase

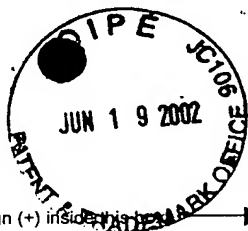
Signature Yoshiteru Hatase

Date March 22, 2002

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☐ \*Total of \_\_\_\_\_ forms are submitted.

Burden Hour Statement: This form is estimated to take 3 minutes to complete. Time will vary depending upon the needs of the individual case. Any Comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.



COPY OF PAPERS  
ORIGINALLY FILED

Please type a plus sign (+) inside this box

PTO/SB/81/(02-01)  
Approved for use through 10/31/2002. OMB 0651-0035  
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to a collection of information unless it display a valid OMB control number.

### POWER OF ATTORNEY OR AUTHORIZATION OF AGENT

Application Number	10/047686
Filing Date	November 13, 2001
First Named Inventor	YOSHITERU HATASE ET. AL.
Title	COLORED THERMOPLASTIC RESIN COMPOSITIONS FOR LASER WELDING, SPECIFIC NEUTRAL ANTHRAQUINONE
Group Art Unit	UNKNOWN
Examiner Name	UNKNOWN
Attorney Docket Number	AD6836 US NA

I hereby appoint:

☒ Practitioners at Customer Number **23906**

☐ Practitioners at Customer Number



23906  
PATENT TRADEMARK OFFICE

Name	Registration Number

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Please change the correspondence address for the above-identified application to:

☒ The above-mentioned Customer Number.

OR

☐ Practitioners at Customer Number

OR

(Insert Bar Code Label Here)

☐ Firm or  
Individual Name

Address

Address

City

State

Zip

Country

Telephone

Fax

I am the:

☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71  
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

#### SIGNATURE of Applicant or Assignee of Record

Name Ryuichi Hayashi

Signature

Date **7-Apr-02**

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below\*.

☐ \*Total of \_\_\_\_\_ forms are submitted.

Burden Hour Statement: This form is estimated to take 3 minutes to complete. Time will vary depending upon the needs of the individual case. Any Comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

RECEIVED  
AUG 01 2002  
TC 1700



COPY OF PAPERS  
ORIGINALLY FILED

Please type a plus sign (+) inside this box

PTO/SB/81/(02-01)  
Approved for use through 10/31/2002. OMB 0851-0035  
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to a collection of information unless it display a valid OMB control number.

### POWER OF ATTORNEY OR AUTHORIZATION OF AGENT

Application Number	10/047686
Filing Date	November 13, 2001
First Named Inventor	YOSHITERU HATASE ET. AL.
Title	COLORLED THERMOPLASTIC RESIN COMPOSITIONS FOR LASER WELDING, SPECIFIC NEUTRAL ANTHRAQUINONE
Group Art Unit	UNKNOWN
Examiner Name	UNKNOWN
Attorney Docket Number	AD6836 US NA

I hereby appoint:

☒ Practitioners at Customer Number **23906**  
OR

☐ Practitioners at Customer Number



23906

PATENT TRADEMARK OFFICE

Name	Registration Number

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Please change the correspondence address for the above-identified application to:

☒ The above-mentioned Customer Number.  
OR

☐ Practitioners at Customer Number   
OR

(Insert Bar Code Label Here)

☐ Firm or  
Individual Name

Address

Address

City

State

Country

Telephone

Fax

I am the:

☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71  
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

### SIGNATURE of Applicant or Assignee of Record

Name Hiroyuki Sumi

Signature *Hiroyuki Sumi*

Date *March 26 2002*

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below\*.

☐ \*Total of \_\_\_\_\_ forms are submitted.

Burden Hour Statement: This form is estimated to take 3 minutes to complete. Time will vary depending upon the needs of the individual case. Any Comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.



COPY OF PAPERS  
ORIGINALLY FILED

PTO/SB/01A (10-01)

Approved for use through 10/31/2002. OMB 0651-0032  
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

**DECLARATION (37 CFR 1.63) FOR UTILITY OR DESIGN APPLICATION USING AN  
APPLICATION DATA SHEET (37 CFR 1.76)**

**Title of Invention**

As the below named inventor(s), I/we declare that:

This declaration is directed to:

- ☐ The attached application, or  
☐ Application No. 10/047686, filed on November 13, 2001,  
☐ as amended on \_\_\_\_\_ (if applicable);

I/we believe that I/we am/are the original and first inventor(s) of the subject matter which is claimed and for which a patent is sought;

I/ we have reviewed and understand the contents of the above-identified application, including the claims, as amended by any amendment specifically referred to above;

I/we acknowledge the duty to disclose to the United States Patent and Trademark Office all information known to me/us to be material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT International filing date of the continuation-in-part application.

All statements made herein of my/own knowledge are true, all statements made herein on information and belief are believed to be true, and further that these statements were made with the knowledge that willful false statements and the like are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001, and may jeopardize the validity of the application or any patent issuing thereon.

**FULL NAME OF INVENTOR(S)**

Inventor one: YOSHITERU HATASE

Signature: \_\_\_\_\_ Citizen of: Japan

Inventor two: REIKO KOSHIDA

Signature: *Reiko Koshida* Citizen of: Japan

Inventor three: HIROYUKI SUMI

Signature: *Hiroyuki Sumi* Citizen of: Japan

Inventor four: RYUICHI HAYASHI

Signature: *Ryuchi Hayashi* Citizen of: Japan

☐ Additional inventors are being named on \_\_\_\_\_ additional form(s) attached hereto.

Burden Hour Statement: This collection of information is required by 35 U.S.C. 115 and 37 CFR 1.63. The information is used by the public to file (and the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This form is estimated to take 1 minute to complete. This time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

RECEIVED  
AUG 01 2002  
TC 1700



COPY OF PAPERS  
ORIGINALLY FILED

PTO/SB/01A (10-01)  
Approved for use through 10/31/2002. OMB 0651-0032  
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE  
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

**DECLARATION (37 CFR 1.63) FOR UTILITY OR DESIGN APPLICATION USING AN  
APPLICATION DATA SHEET (37 CFR 1.76)**

**Title of Invention**

As the below named inventor(s), I/we declare that:

This declaration is directed to:

- ☐ The attached application, or  
☐ Application No. 10/047686, filed on November 13, 2001,  
☐ as amended on \_\_\_\_\_ (if applicable);

I/we believe that I/we am/are the original and first inventor(s) of the subject matter which is claimed and for which a patent is sought;

I/ we have reviewed and understand the contents of the above-identified application, including the claims, as amended by any amendment specifically referred to above;

I/we acknowledge the duty to disclose to the United States Patent and Trademark Office all information known to me/us to be material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT International filing date of the continuation-in-part application.

All statements made herein of my/own knowledge are true, all statements made herein on information and belief are believed to be true, and further that these statements were made with the knowledge that willful false statements and the like are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001, and may jeopardize the validity of the application or any patent issuing thereon.

**FULL NAME OF INVENTOR(S)**

Inventor one: YOSHITERU HATASE

Signature: Yoshiteru Hatase

Citizen of: Japan

Inventor two: REIKO KOSHIDA

Signature: \_\_\_\_\_

Citizen of: Japan

Inventor three: HIROYUKI SUMI

Signature: \_\_\_\_\_

Citizen of: Japan

Inventor four: RYUICHI HAYASHI

Signature: \_\_\_\_\_

Citizen of: Japan

☐ Additional inventors are being named on \_\_\_\_\_ additional form(s) attached hereto.

Burden Hour Statement: This collection of information is required by 35 U.S.C. 115 and 37 CFR 1.63. The information is used by the public to file (and the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This form is estimated to take 1 minute to complete. This time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

RECEIVED  
AUG 01 2002  
TC 1700